Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
MIDDLE DISTRICT OF FLORIDA	_	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Randall First name John Middle name Kurer, II Last name and Suffix (Sr., Jr., II, III)	Laticia First name S Middle name Kurer Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		FKA Laticia S Harden
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-1444	xxx-xx-5207

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10/22/18 7:37PM

Debtor 1 Randall John Kurer, II
Debtor 2 Laticia S Kurer Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	I have not used any business name or EINs. Business name(s) EINs	■ I have not used any business name or EINs. Business name(s) EINs
5.	Where you live	21 Palm Lane	If Debtor 2 lives at a different address:
		Palm Coast, FL 32164 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Flagler	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

	otor 1 Randall John Kure Laticia S Kurer	er, II				Case ı	number (if known)			
Pai	Tell the Court About	Your Bankr	uptcy Ca	se						
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.								
	choosing to file under	■ Chapter 7								
		☐ Chapte	er 11							
		☐ Chapte	er 12							
		☐ Chapte	er 13							
8.	How you will pay the fee	abo orde a pr	ut how yo er. If your e-printed		are paying ayment or	the fee yourself, your behalf, you	you may pay with cash r attorney may pay witl	n, cashier's check, or money n a credit card or check with		
				the fee in installments. If y e in Installments (Official For		e this option, sigr	and attach the Applica	ation for Individuals to Pay		
		☐ I red but app	quest that is not requires to you	t my fee be waived (You ma	ay request may do so able to pa	o only if your inco y the fee in instal	me is less than 150% oments). If you choose	of the official poverty line that this option, you must fill out		
9.	Have you filed for	□ No.								
	bankruptcy within the last 8 years?	Yes.								
		_ 100.	District	Eastern District of Wisconsin	When	8/29/16	Case number	16-28610-beh		
			District		When		Case number			
			District		_ When		Case number			
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	■ No □ Yes.								
			Debtor				Relationship to y	/ou		
			District		_ When		Case number, if	known		
			Debtor				Relationship to y			
			District		_ When		Case number, if	known		
11.	Do you rent your	□ No.	Go to li	ine 12.						
	residence?	Yes.	Has yo	ur landlord obtained an evict	ion judgm	ent against you?				
				No. Go to line 12.						
				Yes. Fill out <i>Initial Statement</i> bankruptcy petition.	t About ai	n Eviction Judgm	ent Against You (Form	101A) and file it with this		

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						•	10/22/18 7:37PM
	tor 1 Randall John Kure tor 2 Laticia S Kurer	er, II				Case number (if known)	
J U U	Laticia 5 Kurei						
ar	3: Report About Any Bu	sinesses	You Owi	n as a Sole Proprie	etor		
12.	Are you a sole proprietor of any full- or part-time	■ No.	Go to	Part 4.			
	business?	☐ Yes.	Name	e and location of bus	siness		
	A sole proprietorship is a	□ res.	riani	o and roodion or but	5.11.000		
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any			
	If you have more than one sole proprietorship, use a		Numl	ber, Street, City, Sta	te & ZIP Code		
	separate sheet and attach it to this petition.		Chec	k the appropriate bo	ox to describe your bus	iness:	
					ness (as defined in 11		
				Single Asset Rea	I Estate (as defined in	11 U.S.C. § 101(51B))	
				Stockbroker (as o	defined in 11 U.S.C. § 1	01(53A))	
				Commodity Broke	er (as defined in 11 U.S	S.C. § 101(6))	
				None of the abov	е		
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i> debtor?	deadlines	s. If you in	ndicate that you are flow statement, and	a small business debte	ther you are a small business debtor so the or, you must attach your most recent bala arn or if any of these documents do not ex	ince sheet, statement of
	For a definition of small	■ No.	I am	not filing under Chap	pter 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am Code		11, but I am NOT a sn	nall business debtor according to the defin	nition in the Bankruptcy
		☐ Yes.	I am	filing under Chapter	11 and I am a small bu	usiness debtor according to the definition	in the Bankruptcy Code.
ari	t 4: Report if You Own or	Have Any	Hazard	ous Property or An	y Property That Need	Is Immediate Attention	
14.	Do you own or have any	■ No.			· · · · ·		
	property that poses or is alleged to pose a threat	☐ Yes.					
	of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?	□ res.	What is	the hazard?			
				diate attention is , why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where i	s the property?			
					Number, Street, City, St	ate & Zip Code	

Debtor 1 Randall John Kurer, II
Debtor 2 Laticia S Kurer

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

	otor 1 otor 2	Randall John Kure Laticia S Kurer	er, II			Case nu	umber (if knowi	n)
Par	t 6:	Answer These Questi	ons for Rep	porting Purposes				
16.		kind of debts do nave?		Are your debts primarily consun ndividual primarily for a personal,			e defined in 1	1 U.S.C. § 101(8) as "incurred by an
			ı	☐ No. Go to line 16b.				
			1	Yes. Go to line 17.				
				Are your debts primarily busines money for a business or investmer				
			I	☐ No. Go to line 16c.				
			ı	☐ Yes. Go to line 17.				
			16c. S	State the type of debts you owe that	at are not consur	mer debts or bus	siness debts	
17.		ou filing under ter 7?	□ No. I	am not filing under Chapter 7. Go	to line 18.			
	after	ou estimate that any exempt erty is excluded and		am filing under Chapter 7. Do you are paid that funds will be available				xcluded and administrative expenses
		nistrative expenses aid that funds will	İ	No				
be available for distribution to unsecured creditors?	ailable for bution to unsecured	I	□ Yes					
18.			1 -49		1 ,000-5,000			25,001-50,000
		you estimate that you owe?	50-99		☐ 5001-10,000			1 50,001-100,000
			☐ 100-199 ☐ 200-999		10,001-25,0	00		I More than100,000
19.		much do you	□ \$0 - \$50	0,000	□ \$1,000,001 ·	- \$10 million		l \$500,000,001 - \$1 billion
		imate your assets to worth?		1 - \$100,000		□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million		\$1,000,000,001 - \$10 billion
				01 - \$500,000 01 - \$1 million		- \$100 million)1 - \$500 million		l \$10,000,000,001 - \$50 billion l More than \$50 billion
20.		much do you	□ \$0 - \$50	0,000	□ \$1,000,001 ·	- \$10 million		1 \$500,000,001 - \$1 billion
	estin to be	ate your liabilities ?		1 - \$100,000	\$10,000,001			\$1,000,000,001 - \$10 billion
				01 - \$500,000 01 - \$1 million	□ \$50,000,001 □ \$100,000,00			\$10,000,000,001 - \$50 billion More than \$50 billion
Part	t 7:	Sign Below						
For	you		I have exa	mined this petition, and I declare u	nder penalty of p	perjury that the i	information p	rovided is true and correct.
				nosen to file under Chapter 7, I am tes Code. I understand the relief a				
				ey represents me and I did not pay I have obtained and read the notic				orney to help me fill out this
			I request re	elief in accordance with the chapte	r of title 11, Unite	ed States Code,	, specified in	this petition.
				nd making a false statement, conco v case can result in fines up to \$25				rty by fraud in connection with a both. 18 U.S.C. §§ 152, 1341, 1519,
			/s/ Randa	all John Kurer, II		/s/ Laticia S		
			Randall Signature	John Kurer, II of Debtor 1		Laticia S Ku Signature of D		
			Executed of	on October 22, 2018		Executed on	October 2	2 2018
				MM / DD / YYYY		_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	MM / DD / Y	

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,	Case 5.10-bk-05/00-5Ai Duc 1	1 11 C U 10/22/10	10/22/18 7:37PM
Debtor 1 Debtor 2 Randall John Ku Laticia S Kurer	rer, II	Case	e number (if known)
For your attorney, if you are represented by one If you are not represented by an attorney, you do not need to file this page.		States Code, and have endings. I have delivered to the d	xplained the relief available under each chapter ebtor(s) the notice required by 11 U.S.C. § 342(b)
to me and page.	/s/ Anna Handy	Date	October 22, 2018
	Signature of Attorney for Debtor		MM / DD / YYYY
	Anna Handy Printed name Handy Legal Services, Inc. Firm name P.O. Box 730083 Ormond Beach, FL 32173 Number, Street, City, State & ZIP Code		
	Contact phone 386-248-3000	Email address	anna.handy2015@gmail.com

0119532 FL Bar number & State

Fill in this infor	mation to identify your	case:		
Debtor 1	Randall John Kui	rer, II		
	First Name	Middle Name	Last Name	
Debtor 2	Laticia S Kurer			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	MIDDLE DISTRICT OF	FLORIDA	
Case number (if known)				☐ Check if this i
				amended filin

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

			ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	52,300.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	19,609.5
	1c. Copy line 63, Total of all property on Schedule A/B	\$	71,909.5
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	87,974.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.0
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	141,414.19
	Your total liabilities	\$	229,388.19
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,326.38
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,777.11
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sc	hedules.
	■ Yes		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- ☐ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

Debtor 1	Randall John Kurer, II
Debtor 2	Laticia S Kurer

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$ 4,465.85

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clain	n
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

	Case s	.10-DK-0370	JO-JAF	DOC 1	Filed 10	1122110	Paye	10 01 74		10/22/18 7:37P
Fill in this in	formation to identify	your case and th	is filing:							
Debtor 1	Randall John									
Debtor 2	First Name Laticia S Kur		e Name	I	Last Name					
(Spouse, if filing)	First Name		e Name	1	Last Name					
United States	Bankruptcy Court for t	he: MIDDLE D	ISTRICT C	OF FLORIDA						
Case number										Check if this is an amended filing
Official F	Form 106A/B									
	ule A/B: Pr	operty								12/15
think it fits besinformation. If it Answer every o	ry, separately list and de t. Be as complete and a more space is needed, a juestion. ribe Each Residence, Bu	ccurate as possibl ttach a separate sl	le. If two ma heet to this	arried people a form. On the t	are filing togethe top of any addit	er, both are o ional pages,	equally resp	onsible for su	pplyin	g correct
☐ No. Go to Yes. Whe	Part 2. ere is the property?									
1.1			What is	the property?	Check all that apply	y				
	70th St. ress, if available, or other desc	ription	·	Single-family ho Duplex or multi- Condominium or	unit building		the amoun	t of any secure	d claim	exemptions. Put us on Schedule D: cured by Property.
Milwau	ikee WI	53218-0000		Manufactured or and	r mobile home		Current va			rent value of the ion you own?
City	State	ZIP Code	□т	nvestment prop Fimeshare Other	erty		Describe			\$52,300.00 wnership interest by the entireties, or
				s an interest in	n the property?	Check one	•	te), if known.	unoy b	y the chineties, of
Milwau	kee		_	Debtor 2 only				•		
County			Other in		he debtors and a		(see in	k if this is com structions) ocal	nmunit	y property
			In fore	eclosure						
2 Add the	dollar value of the nor	rtion you own fo	r all of vo	ur ontrios fro	om Part 1 incl	udina any	ontrine for			
pages yo	dollar value of the por ou have attached for P ribe Your Vehicles									\$52,300.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

ebtor 2 L	_aticia S Kurer			Case number (if known)	
Cars, vans	, trucks, tractors,	sport utility ve	hicles, motorcycles		
□No					
Yes					
				B	1.1.1
.1 Make:	Chrysler		Who has an interest in the property? Check one	the amount of any se	ed claims or exemptions. Put cured claims on <i>Schedule D</i> :
Model: Year:	Pacifica 2007		☐ Debtor 1 only	Creditors Who Have	Claims Secured by Property.
	mate mileage:	198000	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	formation:		☐ At least one of the debtors and another	chare property.	portion you own.
2A8GI	M68X87R326418	3		40.075.0	
			☐ Check if this is community property (see instructions)	\$2,275.0	92,275.00
.2 Make:	Hodan		Who has an interest in the property? Check one		ed claims or exemptions. Put cured claims on <i>Schedule D:</i>
Model:	Odyssey		Debtor 1 only	Creditors Who Have	Claims Secured by Property.
Year:	2008	191000	Debtor 2 only	Current value of the	
	mate mileage: Iformation:	191000	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	L38728B059324		☐ At least one of the debtors and another		
	2007 20200024		Check if this is community property (see instructions)	\$4,800.0	94,800.00
Examples: E			d other recreational vehicles, other vehicles, tercraft, fishing vessels, snowmobiles, motorcyc		
Examples: E ■ No □ Yes Add the de	Soats, trailers, moto	ors, personal wa		le accessories	\$7,075.00
No Yes Add the depages you	Soats, trailers, moto ollar value of the p I have attached fo ibe Your Personal a	ors, personal wa portion you ow or Part 2. Write t	tercraft, fishing vessels, snowmobiles, motorcyc n for all of your entries from Part 2, including that number here	le accessories	\$7,075.00
No ☐ Yes Add the depages you rt 3: Descripty you own a	ollar value of the particle in	portion you ow or Part 2. Write t and Household Ite or equitable int	tercraft, fishing vessels, snowmobiles, motorcyc n for all of your entries from Part 2, including	le accessories	\$7,075.00 Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No □ Yes Add the do.pages you art 3: Description you own of	ollar value of the part of the	portion you ow or Part 2. Write to and Household Ite or equitable into	tercraft, fishing vessels, snowmobiles, motorcyc n for all of your entries from Part 2, including that number here	le accessories	Current value of the portion you own? Do not deduct secured
No Yes Add the depages you own or you own or household Examples:	ollar value of the pure have attached for have any legal goods and furnis Major appliances, escribe	portion you ow or Part 2. Write to and Household Ite or equitable into	n for all of your entries from Part 2, including that number here	le accessories	Current value of the portion you own? Do not deduct secured claims or exemptions.
No Yes Add the depages you own or second the second the second the second through the se	ollar value of the pure have attached for have any legal goods and furnis Major appliances, escribe	portion you ow or Part 2. Write to nd Household Ite or equitable into shings furniture, linens	n for all of your entries from Part 2, including that number here	le accessories	Current value of the portion you own? Do not deduct secured claims or exemptions.
No Yes Add the depages you own or you own or household Examples:	ollar value of the part of the	portion you ow or Part 2. Write to nd Household Ite or equitable into shings furniture, linens	n for all of your entries from Part 2, including that number here	le accessories	Current value of the portion you own? Do not deduct secured claims or exemptions.
No Yes Add the depages you own or tall pages. Household Examples:	ollar value of the part of the	portion you ow or Part 2. Write to and Household Ite or equitable into shings furniture, linens,	n for all of your entries from Part 2, including that number here	le accessories	Current value of the portion you own? Do not deduct secured claims or exemptions. \$100.0
No Yes Add the description of the control of the c	ollar value of the particle of	portion you ow or Part 2. Write to and Household Ite or equitable into shings furniture, linens,	n for all of your entries from Part 2, including that number here	le accessories	Current value of the portion you own? Do not deduct secured

including cell phones, cameras, media players, games

☐ No

Debtor 1 Debtor 2			(if known)
■ Ye	s. Describe		
		4 TVs	\$400.00
			1
		4 Cell Phones	\$200.00
		Computer	\$100.00
Exam	other collecti	figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stands, memorabilia, collectibles	amp, coin, or baseball card collections;
Exam □ No	musical instr	graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis	; canoes and kayaks; carpentry tools;
		6 Bikes	\$300.00
□ No	mples: Pistols, rifles	s, shotguns, ammunition, and related equipment Handgun	\$100.00
□ No	mples: Everyday cl	othes, furs, leather coats, designer wear, shoes, accessories	1
		Clothes	\$200.00
		Shoes	\$200.00
☐ No	<i>mples:</i> Everyday je	welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watche	s, gems, gold, silver
		Wedding rings	\$200.00
Exal □ No	farm animals mples: Dogs, cats, s. Describe	birds, horses	
		Dog	\$1.00

14. Any other personal and household items you did not already list, including any health aids you did not list

■ No

Debtor 1 Debtor 2	Randall John Kurer, II Laticia S Kurer	Case number (if known)	
☐ Yes.	Give specific information		
	the dollar value of all of your entries from Pa art 3. Write that number here	art 3, including any entries for pages you have attached	\$2,251.00
Part 4: De	escribe Your Financial Assets		
Do you ov	wn or have any legal or equitable interest in	any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No	ples: Money you have in your wallet, in your ho	me, in a safe deposit box, and on hand when you file your petition	on
		Cash	\$50.00
Exam _l □ No	its of money ples: Checking, savings, or other financial accoinstitutions. If you have multiple accounts	unts; certificates of deposit; shares in credit unions, brokerage h with the same institution, list each. Institution name:	nouses, and other similar
– 165.			****
	17.1. Checking	Chase	\$100.00
<i>Exam_l</i> ■ No	s, mutual funds, or publicly traded stocks ples: Bond funds, investment accounts with bro		
	ublicly traded stock and interests in incorpo venture	rated and unincorporated businesses, including an interes	t in an LLC, partnership, and
	Give specific information about themName of entity:	 % of ownership:	
Negot		tiable and non-negotiable instruments niers' checks, promissory notes, and money orders. nsfer to someone by signing or delivering them.	
	Give specific information about them Issuer name:		
	ment or pension accounts ples: Interests in IRA, ERISA, Keogh, 401(k), 40	03(b), thrift savings accounts, or other pension or profit-sharing	plans
■ Yes.	List each account separately. Type of account:	Institution name:	
	Pension	Nextera Energy, Inc.	\$1,889.92
	Pension	Vanguard Target	\$1,963.22
	Pension	AT&T Retirement Savings Plan	\$4,130.40

	btor 1 btor 2	Randall John Kurer, II Laticia S Kurer	Case number (if known)	
	Your sh		that you may continue service or use from a company ublic utilities (electric, gas, water), telecommunications companies	s, or others
			Institution name or individual:	
		Rent	Albert M. Esposito & Associates, Inc.	\$2,000.00
		Attorney Costs Deposi	t Handy Legal Services	\$150.00
	Annuiti ■ No	es (A contract for a periodic payment of money	to you, either for life or for a number of years)	
l	☐ Yes	Issuer name and description.		
	26 U.S.C	s in an education IRA, in an account in a quality (5. §§ 530(b)(1), 529A(b), and 529(b)(1).	alified ABLE program, or under a qualified state tuition progra	am.
	■ No □ Yes	Institution name and description.	Separately file the records of any interests.11 U.S.C. § 521(c):	
	Trusts, ■ No	equitable or future interests in property (oth	her than anything listed in line 1), and rights or powers exerci	sable for your benefit
		Give specific information about them		
	Examp	s, copyrights, trademarks, trade secrets, and les: Internet domain names, websites, proceed		
	■ No □ Yes.	Give specific information about them		
		es, franchises, and other general intangibles les: Building permits, exclusive licenses, coope	s erative association holdings, liquor licenses, professional licenses	
		Give specific information about them		
Мо	ney or p	property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax ref	unds owed to you		
	■ No □ Yes. 0	Give specific information about them, including	whether you already filed the returns and the tax years	
29.		support les: Past due or lump sum alimony, spousal su	pport, child support, maintenance, divorce settlement, property se	ttlement
	■ No □ Yes. 0	Give specific information		
30.	Examp _	mounts someone owes you les: Unpaid wages, disability insurance paymer benefits; unpaid loans you made to someo	nts, disability benefits, sick pay, vacation pay, workers' compensa one else	ntion, Social Security
I	■ No □ Yes.	Give specific information		
	Examp	ts in insurance policies les: Health, disability, or life insurance; health s	savings account (HSA); credit, homeowner's, or renter's insurance	ı
	■ No □ Voc. I	Name the insurance company of each policy an	nd list its value.	

		Case 5.10-bk-05/00-5Ai	DOC I	1 1160 10/22/10	rage 13 c	71 74	10/22/18 7:37P
	btor 1 btor 2	Randall John Kurer, II Laticia S Kurer		Case	number (if known)		
ı	If you a someo	terest in property that is due you from someone ware the beneficiary of a living trust, expect proceeds from has died. Give specific information		rance policy, or are curre	ently entitled to rec	eive property bed	cause
		against third parties, whether or not you have file bles: Accidents, employment disputes, insurance claim			payment		
_		Describe each claim					
	Other o	contingent and unliquidated claims of every nature	e, including o	counterclaims of the de	ebtor and rights to	o set off claims	
I	☐ Yes.	Describe each claim					
35.	Any fin	ancial assets you did not already list					
	■ No □ Yes.	Give specific information					
36.		he dollar value of all of your entries from Part 4, in art 4. Write that number here				\$1	0,283.54
Par	t 5: Des	scribe Any Business-Related Property You Own or Have	an Interest In.	List any real estate in Part	1.		
37.	Do you o	own or have any legal or equitable interest in any busines	ss-related prop	perty?			
	No. Go	to Part 6.					
	Yes. G	So to line 38.					
Par		scribe Any Farm- and Commercial Fishing-Related Prope ou own or have an interest in farmland, list it in Part 1.	rty You Own o	r Have an Interest In.			
46.	Do you	own or have any legal or equitable interest in any	farm- or co	mmercial fishing-relate	d property?		
	No.	Go to Part 7.					
	☐ Yes.	. Go to line 47.					
Par	t 7:	Describe All Property You Own or Have an Interest in T	hat You Did N	ot List Above			
ı	Examp No	have other property of any kind you did not alreaules: Season tickets, country club membership Give specific information	dy list?				

Official Form 106A/B Schedule A/B: Property page 6

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

Debto Debto	,			Case number (if known)	
Part 8	List the Totals of Each Part of this Form				
55. I	Part 1: Total real estate, line 2				\$52,300.00
56. l	Part 2: Total vehicles, line 5		\$7,075.00		
57. l	Part 3: Total personal and household items, line 15		\$2,251.00		
58. l	Part 4: Total financial assets, line 36		\$10,283.54		
59. l	Part 5: Total business-related property, line 45		\$0.00		
60. I	Part 6: Total farm- and fishing-related property, line 52		\$0.00		
61. l	Part 7: Total other property not listed, line 54	+	\$0.00		
62.	Total personal property. Add lines 56 through 61	_	\$19,609.54	Copy personal property total	\$19,609.54
63.	Total of all property on Schedule A/B. Add line 55 + line 62				\$71,909.54

Official Form 106A/B Schedule A/B: Property page 7

Fill in this infor	mation to identify your	case:		
Debtor 1	Randall John Kur			
	First Name	Middle Name	Last Name	
Debtor 2	Laticia S Kurer			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	MIDDLE DISTRICT OF	FLORIDA	
Case number (if known)				☐ Check if this amended fili

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B*: *Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2*: *Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1.	Which set of exemptions are you claiming? Che	eck one only, even if your spouse is filing with you.
----	---	---

- \square You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption.	
2007 Chrysler Pacifica 198000 miles 2A8GM68X87R326418	\$2,275.00		11 U.S.C. § 522(d)(2)
Line from Schedule A/B: 3.1		100% of fair market value, up to any applicable statutory limit	
2008 Hodan Odyssey 191000 miles 5FNRL38728B059324	\$4,800.00		11 U.S.C. § 522(d)(2)
Line from Schedule A/B: 3.2		■ 100% of fair market value, up to any applicable statutory limit	
Washer Line from Schedule A/B: 6.1	\$100.00		11 U.S.C. § 522(d)(5)
Line Irom Scriedule A/B. 0.1		■ 100% of fair market value, up to any applicable statutory limit	
Dryer Line from Schedule A/B: 6.2	\$100.00		11 U.S.C. § 522(d)(5)
Line IIOIII S <i>Criedule AVB</i> . 0.2		■ 100% of fair market value, up to any applicable statutory limit	
Sofa	\$150.00		11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 6.3		■ 100% of fair market value, up to any applicable statutory limit	

Debtor 1 Randall John Kurer, II

Laticia S Kurer Debtor 2 Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B 5 Beds 11 U.S.C. § 522(d)(5) \$200.00 Line from Schedule A/B: 6.4 100% of fair market value, up to any applicable statutory limit 4 TVs 11 U.S.C. § 522(d)(5) \$400.00 Line from Schedule A/B: 7.1 100% of fair market value, up to any applicable statutory limit 4 Cell Phones 11 U.S.C. § 522(d)(5) \$200.00 Line from Schedule A/B: 7.2 100% of fair market value, up to any applicable statutory limit Computer \$100.00 11 U.S.C. § 522(d)(5) Line from Schedule A/B: 7.3 100% of fair market value, up to any applicable statutory limit 11 U.S.C. § 522(d)(5) 6 Bikes \$300.00 Line from Schedule A/B: 9.1 100% of fair market value, up to any applicable statutory limit 11 U.S.C. § 522(d)(5) Handgun \$100.00 Line from Schedule A/B: 10.1 100% of fair market value, up to any applicable statutory limit Clothes 11 U.S.C. § 522(d)(5) \$200.00 Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit Shoes 11 U.S.C. § 522(d)(5) \$200.00 Line from Schedule A/B: 11.2 100% of fair market value, up to any applicable statutory limit Wedding rings \$200.00 11 U.S.C. § 522(d)(5) Line from Schedule A/B: 12.1 100% of fair market value, up to any applicable statutory limit Dog 11 U.S.C. § 522(d)(5) \$1.00 Line from Schedule A/B: 13.1 100% of fair market value, up to any applicable statutory limit Cash 11 U.S.C. § 522(d)(5) \$50.00 \$50.00 Line from Schedule A/B: 16.1 100% of fair market value, up to any applicable statutory limit **Checking: Chase** 11 U.S.C. § 522(d)(5) \$100.00 \$100.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit

		Laticia S Kurer			Case number (if known)	
		escription of the property and line on ule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
		on: Nextera Energy, Inc.	\$1,889.92			11 U.S.C. § 522(d)(10)(E)
	Line in	om Schedule A/B. 21.1			100% of fair market value, up to any applicable statutory limit	
		on: Vanguard Target	\$1,963.22			11 U.S.C. § 522(d)(10)(E)
	Line fro	om Schedule A/B: 21.2			100% of fair market value, up to any applicable statutory limit	
	Pensi Plan	on: AT&T Retirement Savings	\$4,130.40			11 U.S.C. § 522(d)(10)(E)
		om Schedule A/B: 21.3		•	100% of fair market value, up to any applicable statutory limit	
		Albert M. Esposito & ciates, Inc.	\$2,000.00		\$2,000.00	11 U.S.C. § 522(d)(5)
		om Schedule A/B: 22.1			100% of fair market value, up to any applicable statutory limit	
	Attori	ney Costs Deposit: Handy Legal	\$150.00		\$150.00	11 U.S.C. § 522(d)(5)
		om Schedule A/B: 22.2			100% of fair market value, up to any applicable statutory limit	
3.		ou claiming a homestead exemption ct to adjustment on 4/01/19 and every 3			led on or after the date of adjustmer	nt.)
	■ N	0				
	□ Y	es. Did you acquire the property covere	ed by the exemption wi	thin 1	,215 days before you filed this case	?
] Yes				

					10/22/18 7:37PN
Fill in this information to	identify you	r case:			
Debtor 1 Rand	dall John Kı	ror II			
First Na	dall John Κι _{ame}	Middle Name Last Name		-	
Debtor 2 Latio	ia S Kurer				
(Spouse if, filing) First Na		Middle Name Last Name		-	
Library Oterior Berger	0	MIDDLE DISTRICT OF FLORIDA			
United States Bankruptcy	Court for the:	MIDDLE DISTRICT OF FLORIDA		-	
Case number					
(if known)				☐ Check	if this is an
				amend	ded filing
•					· ·
Official Form 106I	D				
Schedule D. Cr	_ reditors	Who Have Claims Secure	ad by Propert	V	12/15
Scriedale D. Ci	editor 3	Who have claims secure	ed by I Topert	<u>y </u>	12/13
		f two married people are filing together, both are			
is needed, copy the Addition number (if known).	nal Page, fill it o	out, number the entries, and attach it to this form.	On the top of any additio	nal pages, write your na	me and case
1. Do any creditors have clai	ime cooured by	your property?			
_ *	•				
☐ No. Check this box	and submit th	is form to the court with your other schedules.	You have nothing else t	to report on this form.	
Yes. Fill in all of the	e information b	pelow.			
Part 1: List All Secure	ed Claims				
		nore than one secured claim, list the creditor separat	Column A	Column B	Column C
		a particular claim, list the other creditors in Part 2. A		Value of collateral	Unsecured
much as possible, list the clai	ms in alphabetic	cal order according to the creditor's name.	Do not deduct the	that supports this	portion
2.1 Erspamer Plumb	ing Inc	Describe the property that secures the claim:	value of collateral. \$215.00	claim \$52,300.00	If any \$0.00
Creditor's Name		5662 N 70th St. Milwaukee, WI 53218	<u>Ψ210.00</u>	ΨοΣ,σσσ.σσ	Ψ0.00
0.47 1400700 01-1	- D-I 50	Milwaukee County			
S47 W30760 Stat Unit 105	e Ka. 59	In foreclosure			
P.O. Box 505		As of the date you file, the claim is: Check all that	1		
North Prairie, WI	53153	apply. Contingent			
Number, Street, City, State		☐ Unliquidated			
Number, Street, City, State	a Zip Code	☐ Disputed			
Who owes the debt? Chec	ck one.	Nature of lien. Check all that apply.			
Debter 4 each		☐ An agreement you made (such as mortgage or	secured		
■ Debtor 1 only		car loan)	occurca		
Debtor 2 only	. .	_			
☐ Debtor 1 and Debtor 2 onl	•	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors		Judgment lien from a lawsuit			
☐ Check if this claim relate community debt	es to a	Other (including a right to offset)			
community debt					
Date debt was incurred		Last 4 digits of account number			
2.2 Nationstar Mortg	age LL	Describe the property that secures the claim:	\$87,759.00	\$52,300.00	\$35,674.00
Creditor's Name		5662 N 70th St. Milwaukee, WI 53218			
		Milwaukee County			
8950 Cypress Wa	aters	In foreclosure			
Blvd.		As of the date you file, the claim is: Check all that apply.			
Dallas, TX 75019		Contingent			
Number, Street, City, State	& Zip Code	☐ Unliquidated			
		☐ Disputed			
Who owes the debt? Chec	ck one.	Nature of lien. Check all that apply.			
■ Debtor 1 only		An agreement you made (such as mortgage or	secured		
Debtor 2 only		car loan)			
Debtor 1 and Debtor 2 onl	ly	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors		☐ Judgment lien from a lawsuit			
☐ Check if this claim relate		☐ Other (including a right to offset)			
community debt		. 5 5,			
Date debt was incurred		Last 4 digits of account number			
		Last 7 digits of account number			

otor 1 Randall	John Kurer, II		Case number (if know)
First Name	Middle Name	Last Name	
otor 2 Laticia S			
First Name	Middle Name	Last Name	
dd the dollar value	of your entries in Column A on t	his page. Write that number	here: \$87,974.00
	e of your form, add the dollar va	lue totals from all pages.	\$87,974.00
rite that number he	ere:		73.73.
t 2: List Others	s to Be Notified for a Debt Th	at You Already Listed	
ng to collect from y	you for a debt you owe to someo	ne else, list the creditor in Pa	bbt that you already listed in Part 1. For example, if a collection agency is art 1, and then list the collection agency here. Similarly, if you have more editors here. If you do not have additional persons to be notified for any
	Street, City, State & Zip Code		On which line in Part 1 did you enter the creditor?
_	orthshore Drive		Last 4 digita of account number
Suite 300	Dittistiore Drive		Last 4 digits of account number
Milwaukee,	WI 53217		
	Street, City, State & Zip Code		On which line in Part 1 did you enter the creditor? 2.2
John Barret			
Clerk of Circ	County Courthouse		Last 4 digits of account number
	treet, RM 104		
Milwaukee,			
······································			
	Street, City, State & Zip Code		On which line in Part 1 did you enter the creditor? 2.2
	AR MORTGAGE		
PO Box 199			Last 4 digits of account number
Dallas, TX 7	5219		
Name, Number,	Street, City, State & Zip Code		On which line in Part 1 did you enter the creditor? 2.2
Secretary of	f Housing and		
Urban Deve	lopment		Last 4 digits of account number
Room B-103	3		
•	Ivania Ave. NW		
Washington	, DC 20530		
Name, Number	Street, City, State & Zip Code		On which line in Part 1 did you enter the graditar?
United State			On which line in Part 1 did you enter the creditor? 2.2
	trict of Wisconsi		Last 4 digits of account number
517 East Wi	sconsin Ave		5
Room 530			
Milwaukee.	WI 53202		

	Case 3.10-bk	1-03/00-3AI DOC 1 Tiled 10/22/10 Fage 22 01/4	10/22/18 7:37PM
Fill in this info	rmation to identify your cas	e:	
Debtor 1	Randall John Kurer,	II	
	First Name	Middle Name Last Name	
Debtor 2	Laticia S Kurer		
(Spouse if, filing)	First Name	Middle Name Last Name	
United States B	Bankruptcy Court for the: M	IIDDLE DISTRICT OF FLORIDA	
Case number			Check if this is an
		a	mended filing
Be as complete a any executory co Schedule G: Exec	E/F: Creditors Who nd accurate as possible. Use Pa ntracts or unexpired leases that cutory Contracts and Unexpired	D Have Unsecured Claims art 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY clait could result in a claim. Also list executory contracts on Schedule A/B: Property (Offic Leases (Official Form 106G). Do not include any creditors with partially secured claims by Property. If more space is needed, copy the Part you need, fill it out, number the en	ial Form 106A/B) and on that are listed in
left. Attach the Co		you have no information to report in a Part, do not file that Part. On the top of any addi	
Part 1: List	All of Your PRIORITY Unsec	cured Claims	
1. Do any credi	itors have priority unsecured cla	aims against you?	
No. Go to	Part 2.		
☐ Yes.			
Part 2: List	All of Your NONPRIORITY U	Insecured Claims	
☐ No. You h ■ Yes. 4. List all of yo	ur nonpriority unsecured claims	Submit this form to the court with your other schedules. s in the alphabetical order of the creditor who holds each claim. If a creditor has more the each claim. For each claim listed, identify what type of claim it is. Do not list claims already in	
than one cred Part 2.	ditor holds a particular claim, list th	ne other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the	Continuation Page of
Fait 2.			Total claim
4.1 Albert	Esposito & Associates	Last 4 digits of account number	\$5,100.00
Nonprior	rity Creditor's Name 2nd Street	When was the debt incurred?	- \$3,100.00
Number	r Beach, FL 32136 Street City State Zlp Code curred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debt	or 1 only	☐ Contingent	
☐ Debt	or 2 only	☐ Unliquidated	
■ Debt	or 1 and Debtor 2 only	☐ Disputed	
	ast one of the debtors and another		
	ck if this claim is for a commun		
debt	aim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No		\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes		■ Other. Specify Lease Agreement	_

	Randall John Kurer, II Laticia S Kurer	Case number (if know)	
	Alliance Collection Agencies	Last 4 digits of account number	\$697.00
F	Nonpriority Creditor's Name P.O. Box 1267 Marshfield, WI 54449	When was the debt incurred? 05/31/18	
1	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
[☐ Debtor 2 only	☐ Unliquidated	
_	☐ Debtor 1 and Debtor 2 only	Disputed	
_	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
_	☐ Check if this claim is for a community	☐ Student loans	
c	lebt s the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
[Yes	Other. Specify Medical Bill	
	American Family Insurance Nonpriority Creditor's Name	Last 4 digits of account number 7631	\$1,308.00
1	19275 W Capitol Dr., St L02 Brookfield, WI 53045	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
_	Who incurred the debt? Check one.		
_	Debtor 1 only	Contingent	
_	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
[At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	s the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
_	■ No	□ Debts to pension or profit-sharing plans, and other similar debts	
[☐Yes	Other. Specify Insurance	
	Americollect Inc	Last 4 digits of account number multiple	\$1,214.00
1	Nonpriority Creditor's Name 1851 S Alverno Rd Manitowoc, WI 54220	When was the debt incurred? 2015	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
V	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
[Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
[At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	lebt s the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
_	No	Debts to pension or profit-sharing plans, and other similar debts	
	⊒ Yes		
	⊒ 163	Other. Specify Medical Bill	

	Randall John Kurer, II Laticia S Kurer	Case number (if know)	
4.5	Anesthesiology Assoc. of WI	Last 4 digits of account number	\$93.00
	Nonpriority Creditor's Name Attn.: Bankruptcy Dpt. 225 S. Executive Dr. Brookfield, WI 53005	When was the debt incurred?	70000
_	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Bill	
	AT&T Mobility Nonpriority Creditor's Name	Last 4 digits of account number	\$1,622.52
	Attn.: Bankruptcy Department P.O. Box 6416	When was the debt incurred?	
_	Carol Stream, IL 60197 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other Specify Cell phone charges	
		Other: Specify	
	Aurora Health Care Nonpriority Creditor's Name	Last 4 digits of account number 4552,8349	\$1,368.98
	Attn.: Bankruptcy Department P.O. Box 341700	When was the debt incurred? multiple	
	Milwaukee, WI 53234	_	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	□ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes		
	— 165	■ Other. Specify Medical Bill	

Debtor Debtor	1 Randall John Kurer, II 2 Laticia S Kurer		Case number (if know)	
4.8	Aurora Health Care	Last 4 digits of account number	4078	\$367.00
	Nonpriority Creditor's Name Attn.: Bankruptcy Department P.O. Box 341700 Milwaukee, WI 53234	When was the debt incurred?	12/22/17	<u> </u>
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Medical Bil	<u>!</u>	
4.9	Aurora Health Care Nonpriority Creditor's Name	Last 4 digits of account number	0280	\$635.00
	Attn.: Bankruptcy Department P.O. Box 341700 Milwaukee, WI 53234	When was the debt incurred?	07/02/18	
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Medical Bil	<u> </u>	
4.1	Aurora St Lukes Medical Ctr	Last 4 digits of account number	4246	\$996.59
	Nonpriority Creditor's Name Attn.: Bankruptcy Department 2900 W Oklahoma Ave Milwaukee, WI 53215	When was the debt incurred?	12/22/17, 3/15/17	
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin	a plane, and other similar debts	
	■ No	·		
	Yes	Other. Specify Medical Bil		

	or 1 Randall John Kurer, II or 2 Laticia S Kurer	Case number (if know)	
4.1 1	BAC Homes Loans Servicing LP	Last 4 digits of account number	\$1.00
	Nonpriority Creditor's Name Attn.: Bankruptcy Department 2375 N Glenville Drive	When was the debt incurred?	
	Richardson, TX 75082 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.1	Cach, LLC	Last 4 digits of account number	\$2,759.00
	Nonpriority Creditor's Name		
	P.O. Box 5980	When was the debt incurred?	
	Denver, CO 80217 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Continued	
	Debtor 2 only	☐ Contingent ☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.1	CAP1/Bstby	Last 4 digits of account number	\$1.00
<u> </u>	Nonpriority Creditor's Name		
	Attn.: Bankruptcy Dpt. 26525 N. Riverwoods Blvd.	When was the debt incurred?	
	Lake Forest, IL 60045 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	

Debtor :	1 Randall John Kurer, II 2 Laticia S Kurer	Case number (if know)	
4.1	Capital One Bank USA	Last 4 digits of account number	\$3,142.00
	Nonpriority Creditor's Name Attn.: Bankruptcy P.O. Box 30281 Salt Lake City, UT 84130	When was the debt incurred? multiple	
-	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit card purchases	
4.1	CBNA	Last 4 digits of account number	\$14,650.00
	Nonpriority Creditor's Name Attn.: Bankruptcy Dpt. P.O. Box 6497	When was the debt incurred?	
	Sioux Falls, SD 57117 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit card purchases	
4.1	0. 5		40.051.00
6	Chase Bank USA	Last 4 digits of account number	\$2,654.00
	Nonpriority Creditor's Name P.O. Box 15298 Wilmington, DE 19850	When was the debt incurred?	
-	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other. Specify Credit card purchases	

Children's Hospital of WI	Last 4 digits of account number	\$203.0
Nonpriority Creditor's Name Attn.: Bankruptcy Department 9000 W. Wisconsin Avenue Milwaukee, WI 53226	When was the debt incurred?	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical Bill	
Citibank	Last 4 digits of account number	\$6,382.0
Nonpriority Creditor's Name P.O. Box 6241 Sioux Falls, SD 57117	When was the debt incurred?	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Credit card purchases	
City of Milwaukee	Last 4 digits of account number	\$840.0
Nonpriority Creditor's Name Attn.: Bankrutpcy Department 841 N. Broadway, Room 406 Milwaukee, WI 53202	When was the debt incurred?	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
□Yes	Other. Specify	

	1 Randall John Kurer, II 2 Laticia S Kurer		Case number (if know)	
4.2 0	City of Milwaukee	Last 4 digits of account number	4300	\$3,150.23
	Nonpriority Creditor's Name P.O. Box 3268	When was the debt incurred?	5/10/18, 8/8/18	
	Milwaukee, WI 53201 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	,	or chook an anat app.,	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Utilities		
4.2	Comenity Bank	Last 4 digits of account number		\$913.00
	Nonpriority Creditor's Name P.O. Box 183003 Columbus, OH 43218	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Credit card	purchases	
4.2	Credit First National Assoc.	Last 4 digits of account number		\$1,696.00
	Nonpriority Creditor's Name P.O. Box 81315 Classified OH 44484	When was the debt incurred?		
	Cleveland, OH 44181 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	□Yes	■ Other. Specify Credit card	purchases	

or 1 Randall John Kurer, II Laticia S Kurer	Case number (if know)	
Credit One Bank	Last 4 digits of account number	\$776.00
Nonpriority Creditor's Name P.O. Box 98873	When was the debt incurred?	·
Las Vegas, NV 89193 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debtor 1 only	☐ Contingent	
Debtor 2 only	Unliquidated	
■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt	☐ Student loans	
Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Credit card purchases	
DHS	Last 4 digits of account number	\$1,732.0
Nonpriority Creditor's Name Attn.: PACU P.O. Box 8938	When was the debt incurred?	
Madison, WI 53708 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Discover Bank	Last 4 digits of account number	\$5,355.0
Nonpriority Creditor's Name Attn.: Bankruptcy Department P.O. Box 8003	When was the debt incurred?	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Credit card purchases	

Discover Financial Services	Last 4 digits of account number	\$5,354.0
Nonpriority Creditor's Name P.O. Box15316	When was the debt incurred? 2012	
Wilmington, DE 19850	As of the date you file the claim in Check all that conty	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Credit card purchases	
ELAN Financial Srys	Last 4 digits of account number	\$9,045.
Nonpriority Creditor's Name	Last 4 digits of account number	Ψο,σ ισι
Attn.: Bankruptcy Department P.O. Box 790084	When was the debt incurred?	
Saint Louis, MO 63179		
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	Пол	
Debtor 2 only	Contingent	
_	Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another		
☐ Check if this claim is for a community debt	Student loans	
Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Emergency Medicine Prof.		\$80.
Nonpriority Creditor's Name	Last 4 digits of account number	φου.
298 South Yonge Street Ormond Beach, FL 32174	When was the debt incurred? 11/27/17	
Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	Contingent	
■ Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt	Student loans	
Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No □ Debts to pension or profit-sharing plans, and other similar debts		
	Other. Specify Medical Bill	

Erspamer Plumbing, Inc	Last 4 digits of account number	\$215.0
Nonpriority Creditor's Name		Ψ2 10.
S47 W30760 State Rd 59 Unit 105	When was the debt incurred?	
North Prairie, WI 53153 Number Street City State Zlp Code	As of the date you file the claim in Check all that each	
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Firestone		\$1.
Nonpriority Creditor's Name	Last 4 digits of account number	Ψ1.
P.O. Box 81307 BK14	When was the debt incurred?	
Cleveland, OH 44181		
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only		
Debtor 1 only Debtor 2 only	Contingent	
_	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt	☐ Student loans	
Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify	
First Premier Nonpriority Creditor's Name	Last 4 digits of account number	\$931.
3820 N Louise Ave	When was the debt incurred?	
Tape Only		
Sioux Falls, SD 57107	As of the date were file the plaint in O. 1. 1. 11. 1.	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	□ Continues	
Debtor 2 only	☐ Contingent	
_	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
□ 6 1	- otatoric loans	
☐ Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce that you did not	
•	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	

2 Laticia S Kurer		Case number (if know)	
Florida Hospital Flagler	Last 4 digits of account number	5877,8346,9 563	\$3,666.5
Nonpriority Creditor's Name P.O. Box 864417 Orlando, FL 32886	When was the debt incurred?	09/12/18, 5/17/18	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Medical Bil	<u> </u>	
Froedtert Health	Last 4 digits of account number	8605,4021	\$779.
Nonpriority Creditor's Name Attn.: Bankruptcy Department P.O. Box 3136	When was the debt incurred?	06/20/18, 12/22/17	
Milwaukee, WI 53201 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Medical Bil	<u> </u>	
Froedtert Memorial Hosp.	Last 4 digits of account number	2658	\$2,590.
Nonpriority Creditor's Name Attn.: Bankruptcy Department P.O. Box 9030	When was the debt incurred?	06/07/17	
Menomonee Falls, WI 53051 Number Street City State Zlp Code Who incurred the debt? Check one.	pnee Falls, WI 53051 eet City State Zlp Code As of the date you file, the claim is: Check all that apply		
Debtor 1 only	Поль		
Debtor 2 only	☐ Contingent☐ Unliquidated		
Debtor 2 only Debtor 1 and Debtor 2 only			
At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans		
☐ Check if this claim is for a community			
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐Yes	Other. Specify Medical Bil	ı	

	r 1 Randall John Kurer, II r 2 Laticia S Kurer	Case number (if know)		
J	IRS	Last 4 digits of account number		\$14,090.24
	Nonpriority Creditor's Name Attn.: Bankruptcy Dpt. P.O. Box 7346	When was the debt incurred?	2009, 2014	
	Philadelphia, PA 19101 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Income Tax	xes	
4.3 6	JK Contractors	Last 4 digits of account number	6292	\$225.00
	Nonpriority Creditor's Name 3058 County Rd Y West Bend, WI 53095	When was the debt incurred?	01/08/18	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	lacksquare Debts to pension or profit-sharing plans, and other similar debts		
	Yes	■ Other. Specify Professional Services		
4.3	Lakeshore Medical Clinic	Last 4 digits of account number		\$465.00
7	Nonpriority Creditor's Name Attn.: Bankruptcy Department P.O. Box 340140	When was the debt incurred?		
	Milwaukee, WI 53234 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	aranon agreement of divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
	□Yes	Other. Specify Medical Bi	II	

2 Laticia S Kurer	Case number (if know)	
Landmark Credit Union	Last 4 digits of account number	\$2,730.0
Nonpriority Creditor's Name Attn.: Bankruptcy Department P.O. Box 510870 New Berlin, WI 53151	When was the debt incurred?	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent ☐ Unliquidated	
■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No □ Yes	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
163	Other: Specify	
MACYS/DSNB Nonpriority Creditor's Name	Last 4 digits of account number	\$1,050.0
PO Box 8218 Mason, OH 45040	When was the debt incurred? 12/1/15	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Credit card purchases	
Mcydsnb	Last 4 digits of account number	\$1,050.0
Nonpriority Creditor's Name Attn.: Bankruptcy Department 9111 Duke Blvd.	When was the debt incurred?	
Mason, OH 45040 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□Yes	■ Other. Specify Credit card purchases	

	Debtor 1 Randall John Kurer, II Debtor 2 Laticia S Kurer Case number (if know)				
4.4 1	Medical College of WI	<u>. </u>			
	Nonpriority Creditor's Name Attn.: Bankruptcy Dpt P.O. Box 13308 Milwaukee, WI 53234	When was the debt incurred?			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent ☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not			
	No	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify Medical Bill			
4.4 2	Medical College of WI	Last 4 digits of account number	\$34.81		
	Nonpriority Creditor's Name Attn.: Bankruptcy Dpt P.O. Box 13308	When was the debt incurred? 02/29/16			
	Milwaukee, WI 53234 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	☐ Debtor 1 only	☐ Contingent			
	■ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	■ No	Debts to pension or profit-sharing plans, and other similar debts			
	Yes	■ Other. Specify Medical Bill			
4.4	Medical College of WI Phys. Nonpriority Creditor's Name	Last 4 digits of account number	\$41.00		
	Attn.: Bankruptcy Dpt. 1155 N. Mayfair Road Milwaukee, WI 53226	When was the debt incurred?			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	No	Debts to pension or profit-sharing plans, and other similar debts			
	Yes	■ Other. Specify Medical Bill			

Milwaukee Cty Child Support Nonpriority Creditor's Name	Last 4 digits of account number	\$0
Attn.: John Pintar 901 N. 9th St., #101 Milwaukee, WI 53233	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Oak Crest Urgent Care	Last 4 digits of account number	\$16
Nonpriority Creditor's Name 8201 S. Howell Ave	When was the debt incurred?	<u> </u>
Suite 400		
Oak Creek, WI 53154 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	, , ,	
☐ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	□ Unliquidated	
■ Debtor 1 and Debtor 2 only	Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical Bill	
Optimum Outcomes Inc	Last 4 digits of account number multiple	\$452
Nonpriority Creditor's Name	Last 4 digits of account number	Ψ-02
Attn.: Bankruptcy Department 2651 Warrenville Rd, #500	When was the debt incurred? multiple	
Downers Grove, IL 60515 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	□ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Medical Bill	

	r 1 Randall John Kurer, II r 2 Laticia S Kurer		Case number (if know)	
4.4 7	Pinnacles Peds Care PA	Last 4 digits of account number	5420	\$125.98
	Nonpriority Creditor's Name 180 Pinnacles Dr., Suite 100 Palm Coast, FL 32164	When was the debt incurred?	02/28/18, 9/16/18	-
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing		
	Yes	Other. Specify Medical Bil	<u> </u>	-
4.4	Professional Placement Srvs	Last 4 digits of account number	1189	\$2,367.00
	Nonpriority Creditor's Name Attn.: Bankruptcy Dpt. P.O. Box 612	When was the debt incurred?		-
	Milwaukee, WI 53201 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Medical Bil	l	-
4.4	Professional Placement Srvs	Last 4 digits of account number		\$570.00
	Nonpriority Creditor's Name 316 N. Wilwaukee St Suite 410	When was the debt incurred?		-
	Milwaukee, WI 53202 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	5	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Medical Bil	<u> </u>	_

Prosper Marketplace IN	Last 4 digits of account number	4123	\$15,943.0
Nonpriority Creditor's Name Attn.: Bankruptcy Dpt 101 2nd St, FL 15	When was the debt incurred?		
San Francisco, CA 94105 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	 Obligations arising out of a separeport as priority claims 	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Personal Lo	oan	
Radiation Oncology Assocs	Last 4 digits of account number		\$1,528.0
Nonpriority Creditor's Name Attn.: Bankruptcy Department 11516 N. Port Washington Rd Thionoville, MI 52002	When was the debt incurred?		
Thiensville, WI 53092 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Medical Bil	<u> </u>	
Radiology Specialists of FI	Last 4 digits of account number	RSFL	\$59.2
Nonpriority Creditor's Name PO BOX 864552	When was the debt incurred?	05/17/18	
Orlando, FL 32886-4552 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	 Obligations arising out of a sepa report as priority claims 	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	

Sprint	Last 4 digits of account number	\$32.0
Nonpriority Creditor's Name Attn.: Bankruptcy Department P.O. Box 7949	When was the debt incurred?	
Overland Park, KS 66207 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Cell phone charges	
State Collection Srvs	Last 4 digits of account number 7963	\$136.0
Nonpriority Creditor's Name Attn.: Bankruptcy Department 2509 S. Stoughton Rd	When was the debt incurred?	
Madison, WI 53716 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	,	
☐ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical Bill	
Synchrony Bank/Walmart	Last 4 digits of account number	\$2,786.0
Nonpriority Creditor's Name		Ψ2,7 00.0
P.O. Box 105972 Atlanta, GA 30348	When was the debt incurred?	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
□Yes	■ Other. Specify Credit card purchases	

T-Mobile USA	Last 4 digits of account number	6114	\$789
Nonpriority Creditor's Name C/O Convergent Outsourcing 800 SW 39th St	When was the debt incurred?		
Renton, WA 98057 Number Street City State Zlp Code	As of the date you file, the claim is	: Check all that apply	
Who incurred the debt? Check one.	_		
Debtor 1 only	Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
☐ Check if this claim is for a community debt	☐ Student loans		
Is the claim subject to offset?	Obligations arising out of a separa report as priority claims	ation agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharing	plans, and other similar debts	
□ Yes	■ Other. Specify Cell phone of		
165	Other. Specify Oen phone of	inarges	
Vai Yang & Zoua Yang	Last 4 digits of account number		\$1
Nonpriority Creditor's Name c/o Erie Insurance 2409 N. Main St., Suite 200	When was the debt incurred?		
East Peoria, IL 61611 Number Street City State Zlp Code	As of the date you file, the claim is	: Check all that apply	
Who incurred the debt? Check one.	,	5	
☐ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separa	ation agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharing	plans, and other similar debts	
☐ Yes	Other. Specify		
We Energies Nonpriority Creditor's Name	Last 4 digits of account number		\$370
231 W. Michigan St. Milwaukee, WI 53203	When was the debt incurred?	5/1/18	
Number Street City State Zlp Code	As of the date you file, the claim is	: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	Contingent		
Debtor 2 only	Unliquidated		
■ Debtor 1 and Debtor 2 only	Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separa report as priority claims	ation agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharing	plans, and other similar debts	
NO.			

Laticia S Kurer	Case number (if know)	
WF/WINDOW WORLD	Last 4 digits of account number	\$5,666.0
Nonpriority Creditor's Name CBS MAC F8235-01C PO BOX 14517	When was the debt incurred?	
Des Moines, IA 50306 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Credit card purchases	
Wffnatnbank	Last 4 digits of account number	\$5,666.
Nonpriority Creditor's Name Attn.: Bankruptcy Department P.O. Box 94498	When was the debt incurred?	
Las Vegas, NV 89193 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	7.5 or and date you me, and disamine of one of an area apply	
☐ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Credit card purchases	
WI SCTF	Last 4 digits of account number	\$2,500.0
Nonpriority Creditor's Name Attn.: Bankruptcy Department P.O. Box 07914	When was the debt incurred?	
Milwaukee, WI 53207 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify	

	1 Randall John Kurer, II 2 Laticia S Kurer	Case number (if know)	
4.6	Wilwaukee Water Works	Last 4 digits of account number	\$1,100.00
	Nonpriority Creditor's Name Attn.: Billing Dpt. 841 N. Broadway Milwaukee, WI 53202	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.6	Wisconsin Dpt of Revenue Nonpriority Creditor's Name	Last 4 digits of account number	\$0.00
	Attn.: Special Procedures P.O. Box 8901	When was the debt incurred?	
	Madison, WI 53708 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	\square Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.6	Wisconsin Electric POW	Last 4 digits of account number 1414	\$961.00
	Nonpriority Creditor's Name Attn.: Bankruptcy Dpt 231 W. Michigan St., #A130 Milwaukee, WI 53290	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	lacksquare Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	

Part 3: List Others to Be Notified About a Debt That You Already Listed

Debtor 2 Laticia S Kurer		Case number (if know)
is trying to collect from you for a debt you o	we to someone else, list the original cred ebts that you listed in Parts 1 or 2, list th	that you already listed in Parts 1 or 2. For example, if a collection agency litor in Parts 1 or 2, then list the collection agency here. Similarly, if you e additional creditors here. If you do not have additional persons to be
Name and Address	On which entry in Part 1 or Part 2 or	did you list the original creditor?
Alliance Collection Agencies	Line 4.10 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
P.O. Box 1267		Part 2: Creditors with Nonpriority Unsecured Claims
Marshfield, WI 54449	Last 4 digits of account number	0264
Name and Address	On which entry in Part 1 or Part 2 o	
Americollect, Inc. 1851 S Alverno Rd	Line 4.34 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Manitowoc, WI 54221		Part 2: Creditors with Nonpriority Unsecured Claims
Manitowoo, 111 34221	Last 4 digits of account number	8271
Name and Address	On which entry in Part 1 or Part 2 o	tid you liet the original creditor?
Americollect, Inc.	Line 4.42 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims
1851 S Alverno Rd	Line III or (oncert one).	
Manitowoc, WI 54221		■ Part 2: Creditors with Nonpriority Unsecured Claims
•	Last 4 digits of account number	8271
Name and Address	On which entry in Part 1 or Part 2 or	did you list the original creditor?
Americollect, Inc.	Line 4.8 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
1851 S Alverno Rd		■ Part 2: Creditors with Nonpriority Unsecured Claims
Manitowoc, WI 54221		— Fart 2. Ordators with Horipholity offsecured oldinis
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 or	did you list the original creditor?
AR Resources Inc	Line 4.28 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
1777 Sentry Pkwy W		Part 2: Creditors with Nonpriority Unsecured Claims
Blue Bell, PA 19422	Last 4 digits of account number	— Tart 2. Ordators with Norphority discoured dialins
Name and Address		lid liet the anxiety of the O
Name and Address CREDIT ASSOCIATES	On which entry in Part 1 or Part 2 or Line 4.5 of (<i>Check one</i>):	· _
12129 W Feerick St	Line 4.3 of (Check one).	Part 1: Creditors with Priority Unsecured Claims
Milwaukee, WI 53222		Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 or	did you list the original creditor?
Emergency Medicine Prof.	Line 4.28 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims
P.O. Box 9430		Part 2: Creditors with Nonpriority Unsecured Claims
Daytona Beach, FL 32120		ran in constant man non-priority consists of control
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 or	did you list the original creditor?
Midwest Receivable Solutions	Line 4.58 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims
2323 Gull Rd		■ Part 2: Creditors with Nonpriority Unsecured Claims
Suite E		
Kalamazoo, MI 49048	Last 4 digits of account number	
N	0 1:1 1 : 5 : 4 5 : 6	
Name and Address Professional Placement Srvs	On which entry in Part 1 or Part 2 or Line 4.7 of (<i>Check one</i>):	<u> </u>
Attn.: Bankruptcy Dpt.	Line 4.1 of (Check one).	☐ Part 1: Creditors with Priority Unsecured Claims
P.O. Box 612		Part 2: Creditors with Nonpriority Unsecured Claims
Milwaukee, WI 53201		
	Last 4 digits of account number	8221,6073
Name and Address	On which entry in Part 1 or Part 2 o	did you list the original creditor?
State Collection Service Inc	Line 4.10 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims
2509 S. Stoughton Rd		Part 2: Creditors with Nonpriority Unsecured Claims
Madison, WI 53716		- Fait 2. Creditors with Nonphority Offsecured Claims
	Last 4 digits of account number	6959
Name and Address	On which entry in Part 1 or Part 2 o	did you list the original creditor?
WISCONSIN ELECTRIC	Line 4.64 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
	- · ·	•

Debtor 1	Randall John Kurer, II
Debtor 2	Laticia S Kuror

Debtor 2 Laticia S Kurer

Case number (if know)

333 W EVERETT STA130 Milwaukee, WI 53203

■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
Total	6a.	Domestic support obligations	6a.	\$ 0.00
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 141,414.19
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 141,414.19

Fill in this infor	mation to identify your	case:		
Debtor 1 Randall John Kurer, II				
	First Name	Middle Name	Last Name	
Debtor 2	Laticia S Kurer			
(Spouse if, filing)	First Name	Middle Name	Last Name	-
United States Ba	ankruptcy Court for the:	MIDDLE DISTRICT OF	FLORIDA	
Case number				
(II KHOWH)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Р	erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for	
2.1	Albert Esposito & Associates 213 S. 2nd Street Suite 5 Flagler Beach, FL 32136	Lease	
2.2	Betty J Mcadoo 5662 N 70th Street Milwaukee, WI 53218	Lease	

=:::				10/22/10 7.371
Fill in this in	formation to identify your	case:		
Debtor 1	Randall John Ku First Name		Last Name	
Debtor 2	Laticia S Kurer	Middle Name	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court for the:	MIDDLE DISTRICT OF FLO	DPID4	
Officed States	bankrupicy Court for the.	MIDDLE DISTRICT OF TEC	JULIA	
Case number				
(if known)				☐ Check if this is an
				amended filing
Official F	Form 106H			
	le H: Your Cod	obtore		40/45
Scriedu	ie II. Tour Cou	CDIOI 2		12/15
people are filifill it out, and your name and 1. Do you No Yes 2. Within Arizona, Go Yes. D	ing together, both are equinumber the entries in the did case number (if known under any codebtors? (If the last 8 years, have you california, Idaho, Louisiana to to line 3.	ally responsible for supplying boxes on the left. Attach the left. Asswer every question. You are filing a joint case, do response	ng correct informa e Additional Page not list either spouse erty state or territo o Rico, Texas, Wash	ry? (Community property states and territories include
	In which community stat	e or territory did you live?	-NONE-	. Fill in the name and current address of that person.
in line 2	again as a codebtor only 6D), Schedule E/F (Officia	cors. Do not include your spe f that person is a guarantor	or cosigner. Make	r if your spouse is filing with you. List the person showr sure you have listed the creditor on Schedule D (Officia 06G). Use Schedule D, Schedule E/F, or Schedule G to fi
Co	lumn 1: Your codebtor			Column 2: The creditor to whom you owe the debt
	ne, Number, Street, City, State and Z	IP Code		Check all schedules that apply:
0.4				Под да в п
3.1 Nan	me			☐ Schedule D, line
				☐ Schedule E/F, line
Nun City	mber Street	State	ZIP Code	
Oity		2 	5536	
3.2 Nan	me			Schedule D, line
14011				☐ Schedule E/F, line
				— Scriedule G, IIIle
Nun City	mber Street	State	ZIP Code	
Oity		Ciale	Zii Oude	

Fill	in this information to iden	ntify your ca	ase:			
Deb	otor 1 Rar	ndall Joh	n Kurer, II			
	otor 2 Lati	icia S Ku	rer			
Uni	ted States Bankruptcy Co	ourt for the	MIDDLE DISTRICT C	F FLORIDA		
	se number own)				Check if this is: An amended filing A supplement showing postpetition chap 13 income as of the following date:	ter
Of	fficial Form 10	<u>61</u>			MM / DD/ YYYY	
So	chedule I: You	ur Ince	ome			2/15
sup _l	olying correct informatiuse. If you are separate ch a separate sheet to t	on. If you d and you his form. (are married and not fili r spouse is not filing w	ng jointly, and your spouse is livith you, do not include information	and Debtor 2), both are equally responsible f ving with you, include information about your on about your spouse. If more space is need d case number (if known). Answer every ques	ed,
1.	Fill in your employme information.	nt		Debtor 1	Debtor 2 or non-filling spouse	
	attach a separate page	If you have more than one job, attach a separate page with information about additional		■ Employed □ Not employed	☐ Employed ■ Not employed	
	employers.		Occupation			
	Include part-time, seaso self-employed work.	onal, or	Employer's name	Florida Power & Light		
	Occupation may include	e student	Employer's address	700 Universe Boulevard		

Part 2: Give Details About Monthly Income

or homemaker, if it applies.

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

How long employed there?

North Palm Beach, FL 33408

13 months

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

3. Estimate and list monthly overtime pay.

4. Calculate gross Income. Add line 2 + line 3.

			non-fi	ling spouse
2.	\$	3,293.51	\$	0.00
3.	+\$	181.00	+\$	0.00
4.	\$	3,474.51	\$	0.00

For Debtor 2 or

For Debtor 1

Randall John Kurer, II Debtor 1 Debtor 2 Laticia S Kurer Case number (if known) For Debtor 2 or For Debtor 1 non-filing spouse Copy line 4 here 3.474.51 0.00 List all payroll deductions: Tax, Medicare, and Social Security deductions 5a. 5a. 243.95 0.00 5b. Mandatory contributions for retirement plans 5b. \$ 0.00 0.00 Voluntary contributions for retirement plans 5c. 5c. \$ 193.74 0.00 5d. Required repayments of retirement fund loans 5d. \$ 55.51 0.00 5e. Insurance 5e. 0.00 0.00 5f. **Domestic support obligations** 5f. 0.00 0.00 5q. Union dues 5q. 0.00 0.00 5h. Other deductions. Specify: Dep Life-Sp 5h.+ \$ 22.75 \$ 0.00 St Doc Stamp Tax \$ 9.86 \$ 0.00 \$ Medical 173.33 \$ 0.00 Emp Life Ins \$ 20.09 0.00 \$ Dental 48.77 0.00 Vac Buy 61.88 0.00 **Health Savings** 10.83 0.00 401K 257.42 0.00 Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 1,098.13 0.00 Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 7. 2,376.38 0.00 8 List all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8a. 950.00 0.00 8b. Interest and dividends 8b. 0.00 0.00 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. 0.00 0.00 8d. **Unemployment compensation** 8d. 0.00 0.00 **Social Security** 8e. 8e. 0.00 0.00 Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8f. Specify: 0.00 0.00 Pension or retirement income 8g. 8g. 0.00 \$ 0.00 Other monthly income. Specify: 8h.+ 0.00 \$ 0.00 Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. 950.00 0.00 + \$ 10. Calculate monthly income. Add line 7 + line 9. 10. \$ 3,326.38 0.00 \$ 3,326.38 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. 0.00 Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.

Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies

12.

Com

12. \$ 3,326.38

Combined monthly income

Debtor 1 Debtor 2	Randall John K Laticia S Kurer	·
13. Do :	you expect an incr No.	ease or decrease within the year after you file this form?
	Yes. Explain:	I will have no rental income once the rental property is foreclosed on. I am expecting to receive pay increase in the next few weeks.

	nformation to identify y						
Debtor 1	Randall Joh	n Kurer,	I			eck if this is: An amended filing	
Debtor 2 (Spouse, if f	Laticia S Ku	irer				•	wing postpetition chapter the following date:
United State	es Bankruptcy Court for the	e: MIDDL	E DISTRICT OF FLORIDA			MM / DD / YYYY	
Case number	er						
Officia	al Form 106J						
Be as com	dule J: Your plete and accurate a pn. If more space is no f known). Answer ever	s possible eeded, atta	. If two married people ar ch another sheet to this	e filing together, bo form. On the top of	oth are equal any addit	ually responsible fo ional pages, write y	12 or supplying correct your name and case
Part 1:	Describe Your Hous s a joint case?	ehold					
	o. Go to line 2.						
	es. Does Debtor 2 live	in a senar	ate household?				
_ 10	■ No	a copa					
		st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	hold of De	btor 2.	
2. Do yo	ou have dependents?	□ No					
Do no Debto	ot list Debtor 1 and or 2.	■ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	ot state the ndents names.			Son		2	□ No ■ Yes
аорол	idente namee.						□ No
				Son		5	Yes
				Daughter		11	□ No ■ Yes
							□ No
				Daughter			■ Yes
				Daughter		14	■ No □ Yes
expe	our expenses include nses of people other self and your depende	than $_{oxdot}$	No Yes				
Part 2:	Estimate Your Ongo						
	as of a date after the		uptcy filing date unless y y is filed. If this is a supp				
	of such assistance a		government assistance i luded it on <i>Schedule I:</i> \			Your exp	enses
	ental or home owner ents and any rent for the		ses for your residence. I r lot.	nclude first mortgage	4.	\$	1,275.00
If not	included in line 4:						
4a.	Real estate taxes				4a.	·	0.00
4b.	Property, homeowner	-			4b.	:	0.00
4c. 4d.	Home maintenance, r Homeowner's associa				4c. 4d.	·	0.00
			our residence, such as ho	me equity loans	5.		0.00

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Debtor 1	Randall John Kurer, II		
Debtor 2	Laticia S Kurer	Case number (if known)	

	otor 1 Randall otor 2 Laticia S	John Kurer, II 6 Kurer	Case num	nber (if known)	
6.	Utilities:				
	6a. Electricity,	, heat, natural gas	6a.	\$	150.00
	6b. Water, sev	wer, garbage collection	6b.	\$	150.00
	6c. Telephone	e, cell phone, Internet, satellite, and cable services	6c.	\$	250.00
	6d. Other. Spe	ecify:	6d.	\$	0.00
7.	Food and house	ekeeping supplies	7.	\$	1,000.00
8.	Childcare and o	children's education costs	8.	\$	50.00
9.	Clothing, laund	ry, and dry cleaning	9.	\$	50.00
10.	Personal care p	products and services	10.	\$	50.00
11.	Medical and de	ntal expenses	11.	\$	0.00
12.	Transportation.	. Include gas, maintenance, bus or train fare.			200.00
	Do not include ca		12.	·	200.00
		clubs, recreation, newspapers, magazines, and books	13.	· ·	100.00
		ributions and religious donations	14.	\$	0.00
15.	Insurance.				
		nsurance deducted from your pay or included in lines 4 or 20.	150	¢	420.00
	15a. Life insura		15a.	·	130.00 222.11
	15b. Health ins		15b.	· :	
	15c. Vehicle in		15c.	· <u> </u>	150.00
4.0	15d. Other insu	· · · ·	15d.	a	0.00
	Specify:	nclude taxes deducted from your pay or included in lines 4 or 20.	16.	\$	0.00
17.	Installment or le	ease payments: ents for Vehicle 1	17a.	¢	0.00
		ents for Vehicle 2	17a. 17b.	·	
			17b. 17c.		0.00
	17c. Other Spe			·	0.00
10	17d. Other. Spe	·	17d.	Ф	0.00
10.		of alimony, maintenance, and support that you did not report as your pay on line 5, Schedule I, Your Income (Official Form 106I).		\$	0.00
19.		s you make to support others who do not live with you.		\$	0.00
	Specify:	you mand to support only and not not me many our	19.		<u> </u>
20.	· · ·	erty expenses not included in lines 4 or 5 of this form or on Scho		our Income.	
		s on other property	20a.		0.00
	20b. Real estat	te taxes	20b.	\$	0.00
	20c. Property, I	homeowner's, or renter's insurance	20c.	\$	0.00
	20d. Maintenar	nce, repair, and upkeep expenses	20d.	\$	0.00
		er's association or condominium dues	20e.	\$	0.00
21.	Other: Specify:			+\$	0.00
22.	•	monthly expenses			
	22a. Add lines 4			\$	3,777.11
	22b. Copy line 2	2 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	22c. Add line 22	a and 22b. The result is your monthly expenses.		\$	3,777.11
23.	-	monthly net income.			
		12 (your combined monthly income) from Schedule I.	23a.	·	3,326.38
	23b. Copy your	r monthly expenses from line 22c above.	23b.	-\$	3,777.11
		rour monthly expenses from your monthly income. is your monthly net income.	23c.	\$	-450.73
24.	For example, do yo	an increase or decrease in your expenses within the year after you expect to finish paying for your car loan within the year or do you expect you terms of your mortgage? Explain here: My son requires dental work, which will incr	r mortgage	payment to increase	or decrease because of a
	Tes.	Explain hole, my con requires defined work, which will hier	Jaco IIIy	-wb0110001	

Fill in this infor	mation to identify your	case:			
Debtor 1	Randall John Kui				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	Laticia S Kurer First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	MIDDLE DISTRICT C	DF FLORIDA		
Case number (if known)					Check if this is an amended filing
Official Forr	m 106Dec				
Declarat	tion About a	an Individua	al Debtor's Sched	dules	12/15
years, or both. 1	y or property by fraud ii 8 U.S.C. §§ 152, 1341, 1 n Below		inkruptcy case can result in fines	s up to \$250,000, or impr	isonment for up to 20
Did you pa	y or agree to pay some	eone who is NOT an att	corney to help you fill out bankru	ptcy forms?	
■ No					
☐ Yes. f	Name of person				tition Preparer's Notice, ature (Official Form 119)
	alty of perjury, I declare te true and correct.	that I have read the su		this declaration and	
			ımmary and schedules filed with		
X /s/ Rar	ndall John Kurer, II		immary and schedules filed with X /s/ Laticia S Kure	er	

Date October 22, 2018

Date **October 22, 2018**

	Daniel Islandon			
Debtor 1	Randall John Ku	rer, II Middle Name	Last Name	
Debtor 2	Laticia S Kurer	Middle Name	Last Name	
Spouse if, filing)	First Name	Middle Name	Last Name	
Jnited States	Bankruptcy Court for the:	MIDDLE DISTRICT OF FLOR	RIDA	
Case number if known)				☐ Check if this is an amended filing
Stateme le as comple nformation.	te and accurate as possil	ole. If two married people are a	als Filing for Bankruptcy iling together, both are equally respon form. On the top of any additional pag	sible for supplying correct
		ital Status and Where You Liv	red Before	
Part 1: Giv	e Details About Your Ma	nai otatus and where rou En		
	e Details About Your Mar our current marital status			
. What is y	our current marital status			
. What is y ■ Mar	our current marital status ied married		ere you live now?	
Mhat is y Marı Not During th	our current marital status ied married e last 3 years, have you l	5?	•	
Maris y Mari Not During the	our current marital status ied married e last 3 years, have you l	s? ived anywhere other than whe	•	Dates Debtor 2 lived there
. What is y ■ Mari □ Not During th □ No ■ Yes Debtor 2	our current marital status ied married e last 3 years, have you l	ived anywhere other than where other 1	clude where you live now. Debtor 2 Prior Address: Same as Debtor 1	
Mhat is y Mari Not During the Yes. Debtor 1 212 Bro Palm C	our current marital status ied married e last 3 years, have you l List all of the places you liv Prior Address:	ived anywhere other than who ved in the last 3 years. Do not in Dates Debtor 1 lived there From-To:	Clude where you live now. Debtor 2 Prior Address: Same as Debtor 1 Same as Debtor 1	lived there ■ Same as Debtor 1

Debtor 1 Randall John Kurer Laticia S Kurer	r, II	Cas	e number (if known)	
Part 2 Explain the Sources o	of Your Income			
Fill in the total amount of incor If you are filing a joint case an	om employment or from operation me you received from all jobs and d you have income that you received.	all businesses, including part	-time activities.	ndar years?
☐ No☐ Yes. Fill in the details.				
	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of current year the date you filed for bankruptcy		\$37,258.26	☐ Wages, commissions, bonuses, tips	\$0.00
	☐ Operating a business		☐ Operating a business	
For last calendar year: (January 1 to December 31, 201	Wages, commissions, bonuses, tips	\$59,394.00	☐ Wages, commissions, bonuses, tips	\$0.00
	☐ Operating a business		☐ Operating a business	
For the calendar year before tha (January 1 to December 31, 2010		\$52,937.00	☐ Wages, commissions, bonuses, tips	\$0.00
	☐ Operating a business		☐ Operating a business	
List each source and the gross No Yes, Fill in the details.	s income from each source separa	ately. Do not include income t	hat you listed in line 4.	
	Debtor 1		Dobtor 2	
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
From January 1 of current year the date you filed for bankruptcy		\$9,500.00		
For last calendar year: (January 1 to December 31, 201)	Rental Income	\$6,054.00		
For the calendar year before tha (January 1 to December 31, 2010		\$4,750.00		
Down 2: Link Contain Downsonto	Van Mada Dafara Van Filad far	Paulmontau		
6. Are either Debtor 1's or Deb	s You Made Before You Filed for htor 2's debts primarily consume nor Debtor 2 has primarily cons of for a personal, family, or househo	er debts? umer debts. Consumer debt	s are defined in 11 U.S.C. § 10	01(8) as "incurred by ar
□ No. Go to	s before you filed for bankruptcy, d	did you pay any creditor a tota	I of \$6,425* or more?	
	elow each creditor to whom you panat creditor. Do not include payme		ations, such as child support	

	btor 1 Randall John btor 2 Laticia S Ku	•		Cas	se number (if known)	
	Yes. Debtor 1 o	to adjustment on 4/01/1	to an attorney for this bank 9 and every 3 years after the ve primarily consumer de d for bankruptcy, did you pa	hat for cases filed on		,
	■ Yes		domestic support obligatior			you paid that creditor. Do not Also, do not include payments to an
	Creditor's Name and	d Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	Albert M. Esposit 213 South 2nd St Flagler Beach, FL	reet, Suite 5	Monthly/First Day of Each Moth	\$1,275.00	\$5,100.00	 ☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other Lease
7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and at a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligation alimony.						ou are a general partner; corporations ny managing agent, including one for
	☐ Yes. List all payn Insider's Name and	nents to an insider. Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
8.	insider? Include payments on o	you filed for bankrupted debts guaranteed or cos		ments or transfer a	any property on a	ccount of a debt that benefited an
	Insider's Name and	Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Pa	rt 4: Identify Legal	Actions, Repossession	ns, and Foreclosures			
9.	List all such matters, i modifications, and cor	ncluding personal injury ntract disputes.	cy, were you a party in ar cases, small claims action			
	Yes. Fill in the de	etails.	Nature of the case	Court or agency		Status of the case
	Case number National Mortgag Cooper v. Randal 2018 CV 008097		Foreclosure	John Barrett Clerk of Circuit Milwaukee Cou Courthouse 901 N. 9th Stre Milwaukee, WI	unty et, RM 104	■ Pending □ On appeal □ Concluded

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Debt Debt		Randall John Kurer, II Laticia S Kurer			Case number	if known)		
		e title	Na	ature of the case	Court or agency		Status of th	e case
	In re Latio	e number e: Randall John Kurer, II & cia Kurer :8610-beh		napter 13 ankruptcy	Eastern District of Wisconsin 517 East Wisconsin Avenue, Room 126 Milwaukee, WI 53202			eal
		n 1 year before you filed for bankru all that apply and fill in the details be		as any of your prop	erty repossessed, foreclosed	, garnisl	hed, attached	d, seized, or levied?
]]		No. Go to line 11. Yes. Fill in the information below.						
	Cred	litor Name and Address		escribe the Property	d	Date		Value of the property
l	accou ■ N	n 90 days before you filed for bank unts or refuse to make a payment b No Yes. Fill in the details.			cluding a bank or financial ins	titution,	, set off any a	nmounts from your
		litor Name and Address	De	escribe the action the	e creditor took	Date a	action was	Amount
I Part	Sourt	n 1 year before you filed for bankru-appointed receiver, a custodian, one of the second of the secon	or anoth	er official?				
	per p	with a total value of more than \$6 person on to Whom You Gave the Gift and ress:		Describe the gifts		Dates the gif	you gave fts	Value
14. \	Vithiı ■ N	n 2 years before you filed for bank No Yes. Fill in the details for each gift or o			s or contributions with a tota	l value o	of more than	\$600 to any charity?
	more Char	s or contributions to charities that e than \$600 rity's Name ress (Number, Street, City, State and ZIP Coc		Describe what yo	u contributed	Dates contri	•	Value
Part	6:	List Certain Losses						
	orgai ■ N	n 1 year before you filed for bankrumbling?	uptcy o	since you filed for I	oankruptcy, did you lose anyt	hing bed	cause of thef	t, fire, other disaster,
	Desc	Yes. Fill in the details. cribe the property you lost and the loss occurred	Includ		overage for the loss urance has paid. List pending of Schedule A/B: Property.	Date o	of your	Value of property lost

Randall John Kurer, II Laticia S Kurer Debtor 2

Case number (if known)

	t 7: List Certain Payments or Transfers					
16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.						erty to anyone you
	□ No					
	Yes. Fill in the details.					
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	transferred	l value of any propert	or	ate payment r transfer was ade	Amount of payment
	Handy Legal Services 600 N. Clyde Morris Blvd Daytona Beach, FL 32114			10	0/19/18	\$799.00
 7 .	Within 1 year before you filed for bankrupt promised to help you deal with your credit Do not include any payment or transfer that you	ors or to make paymen			ansfer any prope	erty to anyone who
	Yes. Fill in the details.					
	Person Who Was Paid Address	Description and transferred	value of any propert	or	ate payment transfer was ade	Amount of payment
18.	Within 2 years before you filed for bankrup transferred in the ordinary course of your I Include both outright transfers and transfers in include gifts and transfers that you have alreated No	ffairs? s the granting of a secu		•		
	Yes. Fill in the details.	Description one	l value of	Describe ony		Data transfer was
	Person Who Received Transfer Address Person's relationship to you		Description and value of property transferred payments paid in expense page 2.		eived or debts	Date transfer was made
	reison's relationship to you					
19.	Within 10 years before you filed for bankru beneficiary? (These are often called asset-pi		any property to a self	-settled trust o	ır similar device	of which you are a
	Yes. Fill in the details.					
	Name of trust	Description and	value of the propert	y transferred		Date Transfer was made
Par	t 8: List of Certain Financial Accounts, Ir	nstruments, Safe Depo	sit Boxes, and Storag	je Units		
20.	Within 1 year before you filed for bankrupt sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, asso	or other financial acco	unts; certificates of c	•		
	No Silvi di Livi					
	Yes. Fill in the details.		_	_		
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account of instrument	or Date ac closed moved		Last balance before closing or transfer

moved, or

transferred

transfer

					10/22/18 7:37PN			
	otor 1 otor 2	Randall John Kurer, II Laticia S Kurer		Case number (if known)				
21.		you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, sh, or other valuables?						
		No						
		Yes. Fill in the details.						
		ne of Financial Institution ress (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?			
22.	Have	you stored property in a storage unit or p	lace other than your home within 1	year before you filed for bankruptcy	?			
		No						
		Yes. Fill in the details.						
		e of Storage Facility ress (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?			
Par	t 9:	Identify Property You Hold or Control for	Someone Else					
23.	•	ou hold or control any property that someoneone.	one else owns? Include any proper	ty you borrowed from, are storing fo	r, or hold in trust			
		No						
	_	Yes. Fill in the details.						
		ner's Name ress (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value			
Par	t 10:	Give Details About Environmental Inform	ation					
For	the pu	rpose of Part 10, the following definitions	apply:					
_	•	3	777					
	toxic	conmental law means any federal, state, or substances, wastes, or material into the a ations controlling the cleanup of these su	air, land, soil, surface water, ground					
		neans any location, facility, or property as n, operate, or utilize it, including disposal		law, whether you now own, operate,	or utilize it or used			
		rdous material means anything an environ dous material, pollutant, contaminant, or		s waste, hazardous substance, toxic	substance,			
Rep	ort all	notices, releases, and proceedings that y	ou know about, regardless of wher	n they occurred.				
		any governmental unit notified you that yo	_		ental law?			
		No Yes. Fill in the details.						
		ee of site ress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
25.	Have	you notified any governmental unit of any	·					
		No						
	_	Yes. Fill in the details.						

Name of site

Address (Number, Street, City, State and ZIP Code)

Governmental unit

Address (Number, Street, City, State and ZIP Code)

Date of notice

Environmental law, if you

know it

	btor 1 btor 2	Randall John Kurer, II Laticia S Kurer			Case number (if known)				
26.	Have	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.							
		No Yes. Fill in the details.							
		e Title e Number	Court or a Name Address (I State and ZIP	Number, Street, City,	Nature of the case	Status of the case			
Pai	rt 11:	Give Details About Your Business o	r Connections to	Any Business					
27.	Withi	n 4 years before you filed for bankru	ptcy, did you own	a business or have a	ny of the following connec	tions to any business?			
☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time.						ne			
	I	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)							
	I	☐ A partner in a partnership							
	I	☐ An officer, director, or managing e	executive of a corp	ooration					
	ı	☐ An owner of at least 5% of the voting or equity securities of a corporation							
		No. None of the above applies. Go to Part 12.							
		Yes. Check all that apply above and f	ill in the details be	elow for each busines	S.				
	Busi	iness Name ress	Describe the n	ature of the business	Employer Identifica	tion number al Security number or ITIN.			
		ber, Street, City, State and ZIP Code)	Name of accou	ıntant or bookkeeper	Dates business exis	·			
28.	instit	n 2 years before you filed for bankruputions, creditors, or other parties.	ptcy, did you give	a financial statement	to anyone about your bus	iness? Include all financial			
	Nam	Yes. Fill in the details below.	Date Issued						
	Addı		Date Issueu						
Pai	rt 12:	Sign Below							
are with	true ar n a ban	d the answers on this <i>Statement of F</i> nd correct. I understand that making akruptcy case can result in fines up to §§ 152, 1341, 1519, and 3571.	a false statement,	, concealing property,	or obtaining money or pro				
		all John Kurer, II		ticia S Kurer					
		John Kurer, II e of Debtor 1		a S Kurer ture of Debtor 2					
Dat	te O	ctober 22, 2018	Date	October 22, 2018					
Did ■ N	No	ttach additional pages to Your Staten	nent of Financial A	Affairs for Individuals	Filing for Bankruptcy (Offi	cial Form 107)?			
	10 10	ay or agree to pay someone who is n	•						
ΠY	es. Na	ame of Person Attach the Banki	ruptcy Petition Prep	parer's Notice, Declarati	ion, and Signature (Official F	Form 119).			

Fill in this infor	mation to identify your	case:		
Debtor 1	Randall John Kur	er, II		
	First Name	Middle Name	Last Name	
Debtor 2	Laticia S Kurer			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		MIDDLE DISTRICT OF	FLORIDA	
Case number				☐ Check if this is
(amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C
Creditor's Erspamer Plumbing, Inc.	Ourse death a second.	■ No
name:	Surrender the property.	■ No
Description of 5662 N 70th St. Milwaukee, WI	 ☐ Retain the property and redeem it. ☐ Retain the property and enter into a Reaffirmation Agreement. 	Yes
property 53218 Milwaukee County securing debt: In foreclosure	☐ Retain the property and [explain]:	
Creditor's Nationstar Mortgage LL	■ Surrender the property.	■ No
name:	☐ Retain the property and redeem it.	_
Description of 5662 N 70th St. Milwaukee, WI	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property 53218 Milwaukee County securing debt: In foreclosure	☐ Retain the property and [explain]:	

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will the lease be assumed?

Official Form 108

	Randall John Kurer, II ∟aticia S Kurer	Case number (if known)
Lessor's nar		□ No
Property:		☐ Yes
Lessor's nar		□ No
Property:	or reased	☐ Yes
Lessor's nar		□ No
Description of Property:	ot leased	☐ Yes
Lessor's nar		□ No
Description of Property:	ot leased	☐ Yes
Lessor's nar		□ No
Description of Property:	ot leased	☐ Yes
Lessor's nar		□ No
Description of Property:	ot leased	☐ Yes
Lessor's nar		□ No
Description of Property:	ot leased	☐ Yes
Part 3: Si	gn Below	
Under penal property tha	ty of perjury, I declare that I have indicated m t is subject to an unexpired lease.	vintention about any property of my estate that secures a debt and any personal
X /s/ Randall John Kurer, II		X /s/ Laticia S Kurer
	all John Kurer, II ure of Debtor 1	Laticia S Kurer Signature of Debtor 2
Date	October 22, 2018	Date October 22, 2018

Fill in this information to identify your case:				
Debtor 1	Randall John Kurer, II			
Debtor 2 (Spouse, if filing)	Laticia S Kurer			
United States Bankruptcy Court for the: Middle District of Florida				
Case number				

Check one box only as	directed	in this	form	and i	in	Form
122A-1Supp:						

- 1. There is no presumption of abuse
- 2. The calculation to determine if a presumption of abuse applies will be made under *Chapter 7 Means Test* Calculation (Official Form 122A-2).
- ☐ 3. The Means Test does not apply now because of qualified military service but it could apply later.
- ☐ Check if this is an amended filing

Official Form 122A - 1

Chapter 7 Statement of Your Current Monthly Income

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form.

Part 1: Calculate Your Current Monthly Income

- 1. What is your marital and filing status? Check one only.
 - ☐ Not married. Fill out Column A, lines 2-11.
 - Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.
 - ☐ Married and your spouse is NOT filing with you. You and your spouse are:
 - ☐ Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.
 - □ Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C § 707(b)(7)(B).

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

					Debt	or 1	Debtor non-fil	2 or ng spouse
2.	Your gross wages, salary, tips, bonuses, over payroll deductions).	ertime, and o	commission	ns (befor	re all \$	3,515.85	\$	0.00
3.	Alimony and maintenance payments. Do not Column B is filled in.	include payn	nents from a	spouse	if \$	0.00	\$	0.00
4.	All amounts from any source which are regular of you or your dependents, including child sometimes from an unmarried partner, members of your hold and roommates. Include regular contributions from filled in. Do not include payments you listed on I	upport. Inclu usehold, you om a spouse	ide regular o r dependent	contributi ts, paren	ions its,	0.00	\$	0.00
5.	Net income from operating a business, profe	ssion, or fa	rm					
			Debt	or 1				
	Gross receipts (before all deductions)	\$	0.00					
ı	Ordinary and necessary operating expenses	-\$	0.00					
	Net monthly income from a business, profession	n, or farm \$	0.00	Copy he	ere -> \$	0.00	\$	0.00
6.	Net income from rental and other real proper	ty						
			Debt	or 1				
	Gross receipts (before all deductions)	\$	950	0.00				
	Ordinary and necessary operating expenses	-\$	0	0.00				
	Net monthly income from rental or other real property	\$	950	Co 0.00 he	py re -> \$	950.00	\$	0.00
7.	Interest, dividends, and royalties				\$	0.00	\$	0.00

Official Form 122A-1

Debtor Debtor				Case numbe	er (<i>if known</i>)			
				Column A Debtor 1		Column B Debtor 2 or non-filing s		
8. I	Jnemployment compensation			\$	0.00	\$	0.00	
	Do not enter the amount if you contend that the amoun he Social Security Act. Instead, list it here:	t received was a bene	fit under					
	For you \$	0.	00					
	For your spouse \$		00					
	Pension or retirement income. Do not include any and penefit under the Social Security Act.	nount received that wa	s a	\$	0.00	\$	0.00	
 	ncome from all other sources not listed above. Specific not include any benefits received under the Social seceived as a victim of a war crime, a crime against hurdomestic terrorism. If necessary, list other sources on a otal below.	Security Act or paymer manity, or international a separate page and p	nts I or	\$	0.00	\$	0.00	
				\$	0.00	\$	0.00	
	Total amounts from separate pages, if any.		+	\$	0.00	\$	0.00	
	Calculate your total current monthly income. Add line each column. Then add the total for Column A to the to		\$	4,465.85	+ _	0.00	S 4,46	55.85
Part 2	Determine Whether the Means Test Applies t	o You					income	
12. (Calculate your current monthly income for the year	Follow these steps:						
•	2a. Copy your total current monthly income from line	11		Сор	y line 11 h	ere=>	\$4,46	55.85
	Multiply by 12 (the number of months in a year)						x 12	
	12b. The result is your annual income for this part of th	e form				12b	\$53,59	0.20
13. (Calculate the median family income that applies to	you. Follow these step	os:					
ı	Fill in the state in which you live.	FL						
ı	Fill in the number of people in your household.	7						
-	Fill in the median family income for your state and size Fo find a list of applicable median income amounts, go or this form. This list may also be available at the bank	online using the link s		in the separ		13. ions	\$98,15	00.88
14. I	How do the lines compare?							
	Line 12b is less than or equal to line 13. O	n the top of page 1, ch	eck box	1, There is	no presum	ption of abuse	9.	
	14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	of page 1, check box 2	, The pre	esumption o	f abuse is o	determined by	/ Form 122A-2	
Part 3	Sign Below							
	By signing here, I declare under penalty of perjury	that the information o	n this sta	tement and	in any atta	chments is tr	ue and correct	
	X /s/ Randall John Kurer, II	X /	s/ Latio	ia S Kure	r			
	Randall John Kurer, II		_aticia	S Kurer				
	Signature of Debtor 1		•	e of Debtor 2	2			
	Date October 22, 2018 MM / DD / YYYY			r 22, 2018 / YYYY				
	If you checked line 14a, do NOT fill out or file Forr		*vi , DD	,				

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:		Liquidation	
\$245		filing fee	
	\$75	administrative fee	
	+ \$15	trustee surcharge	
	\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

- \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Middle District of Florida

In re	Randall John Kurer, II Laticia S Kurer		Case No.	
		Debtor(s)	Chapter	7
	VERIF	ICATION OF CREDITOR	R MATRIX	
Γhe ab	ove-named Debtors hereby verify that	the attached list of creditors is true and	correct to the best	of their knowledge.
Date:	October 22, 2018	/s/ Randall John Kurer, II		
		Randall John Kurer, II		
		Signature of Debtor		
Date:	October 22, 2018	/s/ Laticia S Kurer		
		Laticia S Kurer		

Signature of Debtor

Randall John Kurer, II AR Resources Inc Capital One Bank USA 21 Palm Lane 1777 Sentry Pkwy W Attn.: Bankruptcy Palm Coast, FL 32164 Blue Bell, PA 19422 P.O. Box 30281 Salt Lake City, UT 84130 Laticia S Kurer AT&T Mobility CBNA Attn.: Bankruptcy Department Attn.: Bankruptcy Dpt. 21 Palm Lane P.O. Box 6416 Palm Coast, FL 32164 P.O. Box 6497 Carol Stream, IL 60197 Sioux Falls, SD 57117 Anna Handy Chase Bank USA Aurora Health Care Handy Legal Services, Inc. Attn.: Bankruptcy Department P.O. Box 15298 P.O. Box 730083 P.O. Box 341700 Wilmington, DE 19850 Ormond Beach, FL 32173 Milwaukee, WI 53234 Albert Esposito & Associates Aurora St Lukes Medical Ctr Children's Hospital of WI 213 S. 2nd Street Attn.: Bankruptcy Department Attn.: Bankruptcy Department 2900 W Oklahoma Ave 9000 W. Wisconsin Avenue Suite 5 Flagler Beach, FL 32136 Milwaukee, WI 53215 Milwaukee, WI 53226 Alliance Collection Agencies BAC Homes Loans Servicing LP Citibank Attn.: Bankruptcy Department P.O. Box 1267 P.O. Box 6241 2375 N Glenville Drive Marshfield, WI 54449 Sioux Falls, SD 57117 Richardson, TX 75082 Bass & Moglowsky, S.C. City of Milwaukee American Family Insurance 19275 W Capitol Dr., St L02 501 West Northshore Drive P.O. Box 3268 Brookfield, WI 53045 Suite 300 Milwaukee, WI 53201 Milwaukee, WI 53217 Americollect Inc Betty J Mcadoo Comenity Bank 1851 S Alverno Rd 5662 N 70th Street P.O. Box 183003 Manitowoc, WI 54220 Milwaukee, WI 53218 Columbus, OH 43218 Americollect, Inc. Cach, LLC **CREDIT ASSOCIATES**

Anesthesiology Assoc. of WI Attn.: Bankruptcy Dpt. 225 S. Executive Dr. Brookfield, WI 53005

1851 S Alverno Rd

Manitowoc, WI 54221

CAP1/Bstby Attn.: Bankruptcy Dpt. 26525 N. Riverwoods Blvd. Lake Forest, IL 60045

P.O. Box 5980

Denver, CO 80217

Credit First National Assoc. P.O. Box 81315 Cleveland, OH 44181

12129 W Feerick St

Milwaukee, WI 53222

Credit One Bank P.O. Box 98873 Las Vegas, NV 89193 Firestone P.O. Box 81307 BK14 Cleveland, OH 44181 Landmark Credit Union Attn.: Bankruptcy Department P.O. Box 510870 New Berlin, WI 53151

DHS Attn.: PACU P.O. Box 8938 Madison, WI 53708 First Premier 3820 N Louise Ave Tape Only Sioux Falls, SD 57107 MACYS/DSNB PO Box 8218 Mason, OH 45040

Discover Bank

Attn.: Bankruptcy Department

P.O. Box 8003 Hilliard, OH 43026 Florida Hospital Flagler P.O. Box 864417 Orlando, FL 32886 Mcydsnb Attn.: Bankruptcy Department 9111 Duke Blvd. Mason, OH 45040

Discover Financial Services P.O. Box15316 Wilmington, DE 19850 Froedtert Health Attn.: Bankruptcy Department P.O. Box 3136 Milwaukee, WI 53201 Medical College of WI Attn.: Bankruptcy Dpt P.O. Box 13308 Milwaukee, WI 53234

ELAN Financial Srvs Attn.: Bankruptcy Department P.O. Box 790084 Saint Louis, MO 63179 Froedtert Memorial Hosp. Attn.: Bankruptcy Department P.O. Box 9030 Menomonee Falls, WI 53051 Medical College of WI Phys. Attn.: Bankruptcy Dpt. 1155 N. Mayfair Road Milwaukee, WI 53226

Emergency Medicine Prof. 298 South Yonge Street Ormond Beach, FL 32174

Attn.: Bankruptcy Dpt. P.O. Box 7346 Philadelphia, PA 19101

IRS

Midwest Receivable Solutions 2323 Gull Rd Suite E Kalamazoo, MI 49048

Emergency Medicine Prof. P.O. Box 9430 Daytona Beach, FL 32120 JK Contractors 3058 County Rd Y West Bend, WI 53095 Milwaukee Cty Child Support Attn.: John Pintar 901 N. 9th St., #101 Milwaukee, WI 53233

Erspamer Plumbing, Inc S47 W30760 State Rd 59 Unit 105 North Prairie, WI 53153 John Barrett Clerk of Circuit Court Milwaukee County Courthouse 901 N. 9th Street, RM 104 Milwaukee, WI 53233 NATIONSTAR MORTGAGE PO Box 199111 Dallas, TX 75219

Erspamer Plumbing, Inc. S47 W30760 State Rd. 59 Unit 105 P.O. Box 505 North Prairie, WI 53153 Lakeshore Medical Clinic Attn.: Bankruptcy Department P.O. Box 340140 Milwaukee, WI 53234 Nationstar Mortgage LL 8950 Cypress Waters Blvd. Dallas, TX 75019 Oak Crest Urgent Care 8201 S. Howell Ave Suite 400 Oak Creek, WI 53154

Optimum Outcomes Inc Attn.: Bankruptcy Department 2651 Warrenville Rd, #500 Downers Grove, IL 60515

Pinnacles Peds Care PA 180 Pinnacles Dr., Suite 100 Palm Coast, FL 32164

Professional Placement Srvs 316 N. Wilwaukee St Suite 410 Milwaukee, WI 53202

Professional Placement Srvs Attn.: Bankruptcy Dpt. P.O. Box 612 Milwaukee, WI 53201

Prosper Marketplace IN Attn.: Bankruptcy Dpt 101 2nd St, FL 15 San Francisco, CA 94105

Radiation Oncology Assocs Attn.: Bankruptcy Department 11516 N. Port Washington Rd Thiensville, WI 53092

Radiology Specialists of FI PO BOX 864552 Orlando, FL 32886-4552

Secretary of Housing and Urban Development Room B-103 950 Pennsylvania Ave. NW Washington, DC 20530 Sprint

Attn.: Bankruptcy Department P.O. Box 7949 Overland Park, KS 66207

State Collection Service Inc 2509 S. Stoughton Rd Madison, WI 53716

State Collection Srvs Attn.: Bankruptcy Department 2509 S. Stoughton Rd Madison, WI 53716

Synchrony Bank/Walmart P.O. Box 105972 Atlanta, GA 30348

T-Mobile USA C/O Convergent Outsourcing 800 SW 39th St Renton, WA 98057

United States Attorney
Eastern District of Wisconsi
517 East Wisconsin Ave
Room 530
Milwaukee, WI 53202

Vai Yang & Zoua Yang c/o Erie Insurance 2409 N. Main St., Suite 200 East Peoria, IL 61611

We Energies 231 W. Michigan St. Milwaukee, WI 53203

WF/WINDOW WORLD CBS MAC F8235-01C PO BOX 14517 Des Moines, IA 50306 Wffnatnbank

Attn.: Bankruptcy Department

P.O. Box 94498 Las Vegas, NV 89193

WI SCTF

Attn.: Bankruptcy Department

P.O. Box 07914 Milwaukee, WI 53207

Wilwaukee Water Works Attn.: Billing Dpt. 841 N. Broadway Milwaukee, WI 53202

Wisconsin Dpt of Revenue Attn.: Special Procedures P.O. Box 8901 Madison, WI 53708

WISCONSIN ELECTRIC 333 W EVERETT STA130 Milwaukee, WI 53203

Wisconsin Electric POW Attn.: Bankruptcy Dpt 231 W. Michigan St., #A130 Milwaukee, WI 53290 Case 3:18-bk-03706-JAF Doc 1 Filed 10/22/18 Page 74 of 74

B2030 (Form 2030) (12/15)

United States Bankruptcy Court

		Middle District of Florida		
In 1	Randall John Kurer, II re Laticia S Kurer		Case No.	
	Eutiola o Maroi	Debtor(s)	Chapter	7
	DISCLOSURE OF COMP	ENSATION OF ATTO	RNEY FOR D	EBTOR(S)
l.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20 compensation paid to me within one year before the f be rendered on behalf of the debtor(s) in contemplation	filing of the petition in bankruptcy	, or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	799.00
	Prior to the filing of this statement I have receive	ed	\$	799.00
	Balance Due			0.00
2.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
1.	■ I have not agreed to share the above-disclosed co	empensation with any other person	unless they are mem	abers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compet copy of the agreement, together with a list of the			
5.	In return for the above-disclosed fee, I have agreed to	o render legal service for all aspec	ets of the bankruptcy	case, including:
	 a. Analysis of the debtor's financial situation, and reb. Preparation and filing of any petition, schedules, sc. Representation of the debtor at the meeting of cred. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and applications of the secured creditors to reaffirmation agreements and applications. 	statement of affairs and plan which ditors and confirmation hearing, a to reduce to market value; ex ations as needed; preparation	h may be required; and any adjourned hea cemption planning	arings thereof;
5.	By agreement with the debtor(s), the above-disclosed Representation of the debtors in any any other adversary proceeding.			es, relief from stay actions or
		CERTIFICATION		
	T	·		

October 22, 2018	/s/ Anna Handy
Date	Anna Handy
	Signature of Attorney
	Handy Legal Services, Inc.
	P.O. Box 730083
	Ormond Beach, FL 32173
	386-248-3000 Fax: 386-401-2511
	anna.handy2015@gmail.com
	Name of law firm